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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/089,874
	Filing Date	October 3, 2000
	First Named Inventor	Pieter C. LANGEVELD
	Art Unit	1647
	Examiner Name	R. Kosson
	Attorney Docket Number	246152016900

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
☐ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

Client requested transfer

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1. ☐ The correspondence address is NOT affected by this withdrawal.
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OR

☒ Firm or Individual Name **Mr. Bryan H. Davidson
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NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

I hereby certify that this correspondence is being transmitted via facsimile (fax no. 571-273-8300)
to the USPTO Commissioner for Patents at P.O. Box 1450 Alexandria, VA 22313-1450

Dated: August 29, 2006

Signature: *Lindsay Seydel* (Lindsay Seydel)

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